

No. <b>W 79048</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 02/24/2017</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> GAIL BUNDY 1127 S MIDDLETON RD NAMPA ID 83686-8368				
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	1. <b>Mailing Address: Correct in this box if needed.</b> CAB IT LLC GAIL E. BUNDY 1127 S MIDDLETON RD NAMPA ID 83686		3. <u>New</u> Registered Agent Signature.				
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.							
Manager or Member      Name      Street or PO Address      City      State      Country      Postal Code							
Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/> Zachary Bundy      335 Fairview Nampa ID Canyon      83651							
Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/> Gail Bundy      1127 S. Middleton Rd. Nampa, ID Canyon      83686							
Manager <input type="checkbox"/> Member <input type="checkbox"/>							
Manager <input type="checkbox"/> Member <input type="checkbox"/>							
5. Organized Under the Laws of:  <div style="text-align: center; font-weight: bold; font-size: large;">             IDAHO              W 79048           </div>		6. <table style="width: 100%; border: none;"> <tr> <td style="width: 60%;">           Signature: <u>Gail E. Bundy</u> </td> <td style="width: 40%;">           Date: <u>8/24/2017</u> </td> </tr> <tr> <td>           Name (type or print): <u>Gail E. Bundy</u> </td> <td>           Title: <u>owner</u> </td> </tr> </table>		Signature: <u>Gail E. Bundy</u>	Date: <u>8/24/2017</u>	Name (type or print): <u>Gail E. Bundy</u>	Title: <u>owner</u>
Signature: <u>Gail E. Bundy</u>	Date: <u>8/24/2017</u>						
Name (type or print): <u>Gail E. Bundy</u>	Title: <u>owner</u>						
Issued 08/25/2017 by JLI							

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM